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UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
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B Data Sheet

CONFIRMATION NO. 5428

Serial Number 09/395,106	FILING DATE 09/14/1999 RULE	CLASS 264	GROUP ART UNIT 1732	ATTORNEY DOCKET NO. POL3.036
APPLICANTS JAMES A. WESTHOFF, LANGHORNE, PA; JAMES A. KELLY, UPPER BLACK EDDY, PA;				
** CONTINUING DATA ***** <i>PA</i> THIS APPLN CLAIMS BENEFIT OF 60/100,234 09/14/1998				
** FOREIGN APPLICATIONS ***** <i>PA NONE</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 10/04/1999				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <i>PA</i> 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		STATE OR COUNTRY PA	SHEETS DRAWING 9	TOTAL CLAIMS 40
Verified and Acknowledged Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 9		
ADDRESS 003624				
TITLE MANHOLE INSERT FOR MANUFACTURE OF A CAST MEMBER AND TO PROVIDE A STEP INSERT HAVING INCREASED STRUCTURAL AND HOLDING STRENGTH				
FILING FEE RECEIVED 794	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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Bib Data Sheet

CONFIRMATION NO. 5428

SERIAL NUMBER 09/395,106	FILING DATE 09/14/1999 RULE	CLASS 052	GROUP ART UNIT 3637	ATTORNEY DOCKET NO. POL3.036
APPLICANTS JAMES A. WESTHOFF, LANGHORNE, PA; JAMES A. KELLY, UPPER BLACK EDDY, PA;				
** CONTINUING DATA ***** This appln claims benefit of 60/100,234 09/14/1998				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 10/04/1999				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY PA	SHEETS DRAWING 9	TOTAL CLAIMS 40
INDEPENDENT CLAIMS 9				
ADDRESS 003624 VOLPE AND KOENIG, P.C. UNITED PLAZA, SUITE 1600 30 SOUTH 17TH STREET PHILADELPHIA, PA 19103				
TITLE MANHOLE INSERT FOR MANUFACTURE OF A CAST MEMBER AND TO PROVIDE A STEP INSERT HAVING INCREASED STRUCTURAL AND HOLDING STRENGTH				
FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	